



# Quality Improvement Matters

## Care Integration & Drug Safety

### News You Can Use

Issue # 8

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#### Kentucky Diabetes Prevention and Control Program Video Featured on KET



According to Kentucky's Diabetes Prevention and Control Program, one in 10 adult Kentuckians have been diagnosed with diabetes. In 1995, this number was only one in twenty-five. In addition, more than 16% of all hospital stays in Kentucky are related to diabetes.

The KDPCP recently visited Renee Shaw on her show "Connections" on KET and filmed a segment about their program.

To view the show, please [click here](#).

#### Care Transitions Making An Impact

Care Transitions Coach providing tools for patients to be self-advocates in their care when they go home from hospital.

Marlene Barnard smiled as she recalled her visit with that "nice young man at the hospital" as she was getting ready to come home following a fall at her home and a bout with pneumonia. Sitting in her comfortable living room, Barnard patted her 13-year-old Yorkie as she shared her experience.



### **American Psychiatric Association Five Things Physicians and Patients Should Question**

The American Psychiatric Association's (APA) has a new list of questionable uses of antipsychotic medications. This is part of a broader campaign to educate patients and doctors about unneeded and possibly harmful medical treatments and tests.

[Click here](#) to view the resource.

[Click here](#) to read more.

### **Centers for Medicare & Medicaid (CMS) report affirms pharmacist- provided Medication Therapy Management**

If CMS invests money in medication therapy management (MTM) programs for Medicare patients, do these programs improve the quality of chronic care management and reduce health care expenditures?

That was the ultimate question behind the major new Medication Therapy Management in Chronically Ill Populations: Final Report prepared for the CMS Center for Medicare & Medicaid Innovation, according to an APhA Fellow's analysis of the August 2013 report. The APhA Fellow is Maj. Ann D. McManis, BSPHarm, MPA, U.S. Air Force, Biomedical Sciences Corps.

[Click Here](#) to view the 242 page report.

### **Health Care Excel Partners with American Cancer Society and Area Health Education Center for Multidisciplinary Community Meeting in Corbin, Kentucky**

On Tuesday, October 1, 2013, Health Care Excel, the Medicare Quality Improvement Organization (QIO) for Kentucky, partnered with the American Cancer Society (ACS) and the Southern Kentucky Area Health Education Center (AHEC) to facilitate a face-to-face meeting for health care providers from several settings in the Corbin area. Entitled "Better Patient Outcomes through Better Communication," the event focused on health literacy, cancer screenings, care coordination, local barriers, and spreading of successes.

To maximize attendance from all care settings and offer meaningful education, the meeting was scheduled from 5:00 to 8:30 p.m., external speakers were brought in, and continuing education credits were offered for multiple disciplines. Dinner was provided by ACS and catered by a local restaurant.

After presentations, attendees split into three smaller groups, each focusing on one of the event's topics. The activity was called the Knowledge Café, and each group was able to openly discuss best practices, barriers, or other issues within the community. The smaller groups came back together and shared their notes with the larger group.

### **6.0 New Team Registration**

New teams may register for PSPC 6.0 on the HC! Please complete the online participation form to enroll in the sixth collaborative year. From the HC homepage, scroll down to the bottom, select the "PSPC" tab and click the hyperlink: [Learn more about PSPC 6.0!](#)

PSPC 6.0 informational presentations are also available. [Click here](#) to view presentations on the following topics:

- PSPC Overview
- How to Form a Team for PSPC 6.0
- How to Enroll a Team for PSPC 6.0
- What are the PSPC Expectations?
- PSPC Team Story

**Teams who participated in PSPC 5.0 do not need to re-enroll! Your team will automatically roll into the 6.0 collaborative**

year.

**Webinar**  
**End of Life Decisions:**  
**A Community Approach to Hospice and**  
**Palliative Care within Care Transitions**

November 20, 2013  
3:00 to 4:00 p.m. EDT

It's not unusual for health care costs to multiply in the late stages of beneficiaries' lives, often as a result of unnecessary medical testing and treatments. These health care procedures often come at the displeasure of the patient. Often, patients and families members do not speak up for themselves because they may not know how.

[Click here](#) for additional information and dial in instructions.



In addition to the presentations and Knowledge Café, the QIO, ACS, and a photographer all had exhibits set up for sharing information and resources. The QIO offered several tools and resources to providers including several preventive posters, a complete toolkit for the Million Hearts "Bless Your Heart" Campaign, a toolkit for physicians, and tactile wooden mammography beads. The ACS display included several materials geared toward teens and smoking cessation, breast and colon cancer screening, and general cancer resources. The photographer displayed his exhibit, "A Touch of Pink," which included multiple before- and-after portraits and stories of breast cancer survivors, including one male patient.

Health Care Excel hopes to collaborate with other

organizations across the state to schedule similar meetings in the future. If your community is interested in this educational offering, please contact Health Care Excel.

### **Community's Transfer Form Spreads Throughout State**

Health Care Excel is excited to announce the completion of a new Transfer Form available across a patient's continuum of care. The Transfer Form was created by the Bluegrass Community Healthcare Coalition and has been modified with assistance from the Greater Louisville Medical Society Transitions of Care Workgroup. The new form will assist acute care hospitals, long-term care hospitals, and skilled nursing facilities as patients are transferred into a new care setting. The form will allow pertinent health information to be standardized and follow a patient from one setting to the next. The end result is a comprehensive message delivered with a patient as he/she traverses the care continuum. In the end, the form will enhance health care quality, reduce hospital readmission, and decrease avoidable costs.

Sincerely,  
The Care Integration & Drug Safety Team

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### **QUICK LINKS**

- [Care Integration National Coordinating Center \(NCC\)](#)
- [Quality Improvement Organization \(QIO\) Drug Safety Resources](#)
- [Patient Safety and Clinical Pharmacy Services \(PSPC\)](#)
- [Nursing Home Quality Care Collaborative Change Package](#)
- [Quality Assurance Process Improvement](#)
- [Tell Your Story](#)

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